

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

G Ryan for Congress

ADDRESS (number and street)

403 Blair Ave

Check if different
than previously
reported. (ACC)

Saint Paul

MN

55103

2. FEC IDENTIFICATION NUMBER ▼

C

C00607846

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

MN

04

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

01

Y Y Y Y

2016

through

M M / D D / Y Y Y Y

06

D D / Y Y Y Y

30

Y Y Y Y

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Paul Holmgren

Signature of Treasurer

Paul Holmgren

[Electronically Filed]

Date

M M / D D / Y Y Y Y

07

D D / Y Y Y Y

18

Y Y Y Y

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

G Ryan for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	6760.00	6760.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	6760.00	6760.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	4195.90	4533.51
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	4195.90	4533.51
8. Cash on Hand at Close of Reporting Period (from Line 27).....	6967.19	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	4876.58	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

PAGE 3 / 30

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

G Ryan for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	6

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees**

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized.....

1660.00

1660.00

(iii) TOTAL of contributions from individuals ▶

1660.00

1660.00

(b) Political Party Committees.....

5000.00

5000.00

(c) Other Political Committees (such as PACs).....

100.00

100.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

6760.00

6760.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

3436.97

4876.58

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

3436.97

4876.58

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

10196.97

11636.58

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 30

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4195.90	4533.51
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	10.00	135.88
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	4205.90	4669.39

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	976.12
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	10196.97
25. SUBTOTAL (add Line 23 and Line 24).....	11173.09
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4205.90
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6967.19

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 30

☐ 11a ☒ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

G Ryan for Congress

Full Name (Last, First, Middle Initial)

CD4-RPM, REPUBLICAN PARTY OF MINNESOTA

A.

Mailing Address 3425 MCKNIGHT RD N

City

WHITE BEAR LAKE

State

MN

Zip Code

55110

FEC ID number of contributing
federal political committee.

C C00621185

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

05 / **14** / **2016**

Transaction ID : SA11B.4145

Amount of Each Receipt this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CD4-RPM, REPUBLICAN PARTY OF MINNESOTA

B.

Mailing Address 3425 MCKNIGHT RD N

City

WHITE BEAR LAKE

State

MN

Zip Code

55110

FEC ID number of contributing
federal political committee.

C C00621185

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

05 / **18** / **2016**

Transaction ID : SA11B.4159

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

05 / **18** / **2016**

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

5000.00

TOTAL This Period (last page this line number only).....

5000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 30

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

G Ryan for Congress

Full Name (Last, First, Middle Initial)

67th Senate District-Republican Party of MN

Mailing Address PO Box 75636

City

Saint Paul

State

MN

Zip Code

55175

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M / D D / Y Y Y Y
06 16 2016

Transaction ID : SA11C.4177

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

100.00

100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 30

<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

G Ryan for Congress

Full Name (Last, First, Middle Initial)

GREGORY THOMAS RYAN**A.**

Mailing Address 2800 HILLSCOURTE COURT S

City

ROSEVILLE

State

MN

Zip Code

55113

FEC ID number of contributing
federal political committee.**C** H6MN04236

Name of Employer

Ryan Plumbing/Heating Company

Occupation

Owner/Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1523.85

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		06		2016

Transaction ID : SA13A.4206

Amount of Each Receipt this Period

84.24

☐ Memo Item

Cellphone Payment

Full Name (Last, First, Middle Initial)

GREGORY THOMAS RYAN**B.**

Mailing Address 2800 HILLSCOURTE COURT S

City

ROSEVILLE

State

MN

Zip Code

55113

FEC ID number of contributing
federal political committee.**C** H6MN04236

Name of Employer

Ryan Plumbing/Heating Company

Occupation

Owner/Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2076.93

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		21		2016

Transaction ID : SA13A.4207

Amount of Each Receipt this Period

553.08

☐ Memo Item

Initial Sign Order

Full Name (Last, First, Middle Initial)

GREGORY THOMAS RYAN**C.**

Mailing Address 2800 HILLSCOURTE COURT S

City

ROSEVILLE

State

MN

Zip Code

55113

FEC ID number of contributing
federal political committee.**C** H6MN04236

Name of Employer

Ryan Plumbing/Heating Company

Occupation

Owner/Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2164.40

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		30		2016

Transaction ID : SA13A.4209

Amount of Each Receipt this Period

87.47

☐ Memo Item

Campaign Cell Phone

SUBTOTAL of Receipts This Page (optional).....

724.79

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 30

☐ 11a ☐ 11b ☐ 11c ☐ 11d
12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

G Ryan for Congress

Full Name (Last, First, Middle Initial)

GREGORY THOMAS RYAN

Mailing Address 2800 HILLSCOURTE COURT S

City
ROSEVILLE

State Zip Code
MN 55113

FEC ID number of contributing
federal political committee.

C H6MN04236

Name of Employer
Ryan Plumbing/Heating Company

Occupation
Owner/Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2238.64

Date of Receipt

M M / D D / Y Y Y Y
05 05 2016

Transaction ID : SA13A.4211

Amount of Each Receipt this Period

74.24

☐ Memo Item
Mailing Supplies

Full Name (Last, First, Middle Initial)

GREGORY THOMAS RYAN

Mailing Address 2800 HILLSCOURTE COURT S

City
ROSEVILLE

State Zip Code
MN 55113

FEC ID number of contributing
federal political committee.

C H6MN04236

Name of Employer
Ryan Plumbing/Heating Company

Occupation
Owner/Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2671.78

Date of Receipt

M M / D D / Y Y Y Y
05 10 2016

Transaction ID : SA13A.4212

Amount of Each Receipt this Period

433.14

☐ Memo Item
Printing Push Cards

Full Name (Last, First, Middle Initial)

GREGORY THOMAS RYAN

Mailing Address 2800 HILLSCOURTE COURT S

City
ROSEVILLE

State Zip Code
MN 55113

FEC ID number of contributing
federal political committee.

C H6MN04236

Name of Employer
Ryan Plumbing/Heating Company

Occupation
Owner/Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3026.78

Date of Receipt

M M / D D / Y Y Y Y
05 26 2016

Transaction ID : SA13A.4249

Amount of Each Receipt this Period

355.00

☐ Memo Item
Candidate Filing Fee/Name Tag/Voter Lists

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

862.38

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 30

☐ 11a ☐ 11b ☐ 11c ☐ 11d
12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

G Ryan for Congress

Full Name (Last, First, Middle Initial)

GREGORY THOMAS RYAN

A.

Mailing Address 2800 HILLSCOURTE COURT S

City

ROSEVILLE

State

MN

Zip Code

55113

FEC ID number of contributing
federal political committee.

C H6MN04236

Name of Employer

Ryan Plumbing/Heating Company

Occupation

Owner/Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3545.50

Date of Receipt

05 / **27** / **2016**

Transaction ID : SA13A.4214

Amount of Each Receipt this Period

518.72

☐ Memo Item

Payment of Credit Card Purchases

Full Name (Last, First, Middle Initial)

GREGORY THOMAS RYAN

B.

Mailing Address 2800 HILLSCOURTE COURT S

City

ROSEVILLE

State

MN

Zip Code

55113

FEC ID number of contributing
federal political committee.

C H6MN04236

Name of Employer

Ryan Plumbing/Heating Company

Occupation

Owner/Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3632.97

Date of Receipt

06 / **01** / **2016**

Transaction ID : SA13A.4216

Amount of Each Receipt this Period

87.47

☐ Memo Item

Campaign Cell Phone

Full Name (Last, First, Middle Initial)

GREGORY THOMAS RYAN

C.

Mailing Address 2800 HILLSCOURTE COURT S

City

ROSEVILLE

State

MN

Zip Code

55113

FEC ID number of contributing
federal political committee.

C H6MN04236

Name of Employer

Ryan Plumbing/Heating Company

Occupation

Owner/Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4212.97

Date of Receipt

06 / **17** / **2016**

Transaction ID : SA13A.4217

Amount of Each Receipt this Period

580.00

☐ Memo Item

Sign Painting

SUBTOTAL of Receipts This Page (optional).....

1186.19

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 30

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

G Ryan for Congress

Full Name (Last, First, Middle Initial)

GREGORY THOMAS RYAN

A.

Mailing Address 2800 HILLSCOURTE COURT S

City

ROSEVILLE

State

MN

Zip Code

55113

FEC ID number of contributing
federal political committee.

C H6MN04236

Name of Employer

Ryan Plumbing/Heating Company

Occupation

Owner/Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4300.44

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	29	/	2016

Transaction ID : SA13A.4218

Amount of Each Receipt this Period

87.47

☐ Memo Item
 Campaign Cell Phone

Full Name (Last, First, Middle Initial)

GREGORY THOMAS RYAN

B.

Mailing Address 2800 HILLSCOURTE COURT S

City

ROSEVILLE

State

MN

Zip Code

55113

FEC ID number of contributing
federal political committee.

C H6MN04236

Name of Employer

Ryan Plumbing/Heating Company

Occupation

Owner/Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4876.58

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	29	/	2016

Transaction ID : SA13A.4220

Amount of Each Receipt this Period

576.14

☐ Memo Item
 Payment of Credit Card Purchases

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

663.61

TOTAL This Period (last page this line number only).....

3436.97

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 30

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

G Ryan for Congress

Full Name (Last, First, Middle Initial)

A. 4imprint

Mailing Address 101 Commerce St

City	State	Zip Code
Oshkosh	WI	54901

Purpose of Disbursement
Campaign Table Covers

006

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		31		2016

Amount of Each Disbursement this Period

215.90

☐ Memo Item

Transaction ID : SB17.4251

B. Look Sign

Mailing Address 5635 142nd Ave NW

City	State	Zip Code
Ramsey	MN	55303

Purpose of Disbursement
Convention Signs

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		21		2016

Amount of Each Disbursement this Period

258.97

☐ Memo Item

Transaction ID : SB17.4227

c. MN Secretary of State

Mailing Address 60 Empire Dr

City	State	Zip Code
Saint Paul	MN	55103

Purpose of Disbursement
Candidate Filing Fee

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		26		2016

Amount of Each Disbursement this Period

300.00

☐ Memo Item

Transaction ID : SB17.4246

SUBTOTAL of Disbursements This Page (optional).....

774.87

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 30

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

G Ryan for Congress

Full Name (Last, First, Middle Initial)

A. Rod Thompson Sign Painting

Mailing Address 1511 Iglehart Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2016

City	State	Zip Code
Saint Paul	MN	55104

Amount of Each Disbursement this Period

580.00

Purpose of Disbursement
Campaign Office Sign

004

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : SB17.4257

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

B. T-Mobile

Mailing Address PO Box 790047

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2016

City	State	Zip Code
St Louis	MO	63179

Amount of Each Disbursement this Period

87.47

Purpose of Disbursement
Campaign Cell Phone

001

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : SB17.4250

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

C. T-Mobile

Mailing Address PO Box 790047

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		29		2016

City	State	Zip Code
St Louis	MO	63179

Amount of Each Disbursement this Period

87.47

Purpose of Disbursement
Campaign Cell Phone

001

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : SB17.4256

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

754.94

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 30

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

G Ryan for Congress

Full Name (Last, First, Middle Initial)

A. US Postal Service

Mailing Address 1430 Concordia Ave

City	State	Zip Code
Saint Paul	MN	55104

Purpose of Disbursement
Fundraising Postage

003

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2016

Amount of Each Disbursement this Period

470.00

☐ Memo Item

Transaction ID : SB17.4234

B. Vistaprint

Mailing Address 95 Hayden Ave

City	State	Zip Code
Lexington	MA	02421

Purpose of Disbursement
Banner/Business Cards

006

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2016

Amount of Each Disbursement this Period

142.53

☐ Memo Item

Transaction ID : SB17.4240

C. Vistaprint

Mailing Address 95 Hayden Ave

City	State	Zip Code
Lexington	MA	02421

Purpose of Disbursement
Campaign Printing

006

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		06		2016

Amount of Each Disbursement this Period

113.26

☐ Memo Item

Transaction ID : SB17.4267

SUBTOTAL of Disbursements This Page (optional).....

725.79

TOTAL This Period (last page this line number only).....

3466.36

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 30

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

G Ryan for Congress

Full Name (Last, First, Middle Initial)

A. US Postal Service

Mailing Address 1430 Concordia Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2016

City	State	Zip Code
Saint Paul	MN	55104

Amount of Each Disbursement this Period

1.00

Purpose of Disbursement
Change of Address Fee

001

☐ Memo Item

Candidate Name

Category/
Type

Transaction ID : SB21.4198

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type☐ Memo Item

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type☐ Memo Item

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1.00

1.00

SCHEDULE C (FEC Form 3)
LOANS

PAGE 16 OF 30

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4100

G Ryan for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

GREGORY THOMAS RYAN

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2800 HILLSCOURTE COURT S

City

State

ZIP Code

ROSEVILLE

MN

55113

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
01 / 15 / 2016

Date Due

M M / D D / Y Y Y Y
/ 12/31/16

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 17 OF 30

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4125

G Ryan for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

GREGORY THOMAS RYAN

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2800 HILLSCOURTE COURT S

City

State

ZIP Code

ROSEVILLE

MN

55113

Original Amount of Loan

102.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

102.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
01 / 23 / 2016

Date Due

M M / D D / Y Y Y Y
/ 12/31/16

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

102.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 18 OF 30

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4124

G Ryan for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

GREGORY THOMAS RYAN

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2800 HILLSCOURTE COURT S

City

State

ZIP Code

ROSEVILLE

MN

55113

Original Amount of Loan

258.91

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

258.91

TERMS

Date Incurred

M M / D D / Y Y Y Y
02 / 29 / 2016

Date Due

M M / D D / Y Y Y Y
12/31/16

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

258.91

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 19 OF 30

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4129

G Ryan for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

GREGORY THOMAS RYAN

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2800 HILLSCOURTE COURT S

City

State

ZIP Code

ROSEVILLE

MN

55113

Original Amount of Loan

78.70

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

78.70

TERMS

Date Incurred

M M / D D / Y Y Y Y
03 / 31 / 2016

Date Due

M M / D D / Y Y Y Y
/ / 12/31/16

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

78.70

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 20 OF 30

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4206

G Ryan for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

GREGORY THOMAS RYAN

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2800 HILLSCOURTE COURT S

City

State

ZIP Code

ROSEVILLE

MN

55113

Original Amount of Loan

84.24

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

84.24

TERMS

Date Incurred

M M / D D / Y Y Y Y
04 / 06 / 2016

Date Due

M M / D D / Y Y Y Y
/ 12/31/16

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

84.24

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 21 OF 30

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4207

G Ryan for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

GREGORY THOMAS RYAN

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2800 HILLSCOURTE COURT S

City

State

ZIP Code

ROSEVILLE

MN

55113

Original Amount of Loan

553.08

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

553.08

TERMS

Date Incurred

M / D / Y
04 / 21 / 2016

Date Due

M / D / Y
/ / 12/31/16

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

553.08

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 22 OF 30

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4209

G Ryan for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

GREGORY THOMAS RYAN

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2800 HILLSCOURTE COURT S

City

State

ZIP Code

ROSEVILLE

MN

55113

Original Amount of Loan

87.47

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

87.47

TERMS

Date Incurred

M M / D D / Y Y Y Y
04 / 30 / 2016

Date Due

M M / D D / Y Y Y Y
/ / 12/31/16

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

87.47

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 23 OF 30

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4211

G Ryan for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

GREGORY THOMAS RYAN

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2800 HILLSCOURTE COURT S

City

State

ZIP Code

ROSEVILLE

MN

55113

Original Amount of Loan

74.24

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

74.24

TERMS

Date Incurred

M / M / Y
05 / 05 / 2016

Date Due

M / M / Y
12 / 31 / 16

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

74.24

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 24 OF 30

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4212

G Ryan for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

GREGORY THOMAS RYAN

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2800 HILLSCOURTE COURT S

City

State

ZIP Code

ROSEVILLE

MN

55113

Original Amount of Loan

433.14

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

433.14

TERMS

Date Incurred

M M / D D / Y Y Y Y
05 / 10 / 2016

Date Due

M M / D D / Y Y Y Y
/ 12/31/16

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

433.14

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 25 OF 30

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4249

G Ryan for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

GREGORY THOMAS RYAN

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
2800 HILLSCOURTE COURT S

City	State	ZIP Code
ROSEVILLE	MN	55113

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<input type="text" value="355.00"/>	<input type="text" value="0.00"/>	<input type="text" value="355.00"/>

TERMS

Date Incurred

 / /

Date Due

 / /

Interest Rate

 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text" value=""/>

SUBTOTALS This Period This Page (optional)..... ►**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 26 OF 30

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4214

G Ryan for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

GREGORY THOMAS RYAN

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2800 HILLSCOURTE COURT S

City

State

ZIP Code

ROSEVILLE

MN

55113

Original Amount of Loan

518.72

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

518.72

TERMS

Date Incurred

M M / D D / Y Y Y Y
05 / 27 / 2016

Date Due

M M / D D / Y Y Y Y
/ 12/31/16

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

518.72

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 27 OF 30

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4216

G Ryan for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

GREGORY THOMAS RYAN

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2800 HILLSCOURTE COURT S

City

State

ZIP Code

ROSEVILLE

MN

55113

Original Amount of Loan

87.47

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

87.47

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 01 / 2016

Date Due

M M / D D / Y Y Y Y
/ / 12/31/16

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

87.47

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 28 OF 30

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4217

G Ryan for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

GREGORY THOMAS RYAN

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
2800 HILLSCOURTE COURT SCity State ZIP Code
ROSEVILLE MN 55113

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
580.00	0.00	580.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 17 / 2016

Date Due

M M / D D / Y Y Y Y
/ / 12/31/16

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)..... ►

580.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 29 OF 30

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4218

G Ryan for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

GREGORY THOMAS RYAN

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2800 HILLSCOURTE COURT S

City

State

ZIP Code

ROSEVILLE

MN

55113

Original Amount of Loan

87.47

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

87.47

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 29 / 2016

Date Due

M M / D D / Y Y Y Y
/ / 12/31/16

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

87.47

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 30 OF 30

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4220

G Ryan for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** ☐ Memo Item

GREGORY THOMAS RYAN

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2800 HILLSCOURTE COURT S

City

State

ZIP Code

ROSEVILLE

MN

55113

Original Amount of Loan

576.14

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

576.14

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 29 / 2016

Date Due

M M / D D / Y Y Y Y
12/31/16

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

576.14

TOTALS This Period (last page in this line only)..... ►

4876.58

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.